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23995 7590 08/24/2006

RABIN & Berdo, PC
 1101 14TH STREET, NW
 SUITE 500
 WASHINGTON, DC 20005

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/748,667	12/31/2003	Chao-Cheng Lee	TOP 348	2788

TITLE OF INVENTION: AMPLIFIER CIRCUIT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/24/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, PATRICIA T	2817	330-282000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Rabin & Berdo, P.C. 1 _____ 2 _____ 3 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

REALTEK SEMICONDUCTORS CORP.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

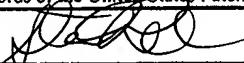
Hsinchu, Taiwan, Republic of China
 16/02/2006 JADDE 00000013 10748667

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 18-0002 352-00000000

4a. The following fee(s) are submitted:	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check is enclosed.
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<input type="checkbox"/> Advance Order - # of Copies _____	<input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 18-0002 (enclose an extra copy of this form).

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Authorized Signature 

Date September 29, 2006

Typed or printed name Steven M. Rabin

Registration No. 29,102

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